

# State of Nevada Policy Statement on Expulsion and Suspension in Early Childhood Settings

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## Purpose

Nevada aims to prevent children from being expelled, suspended or excluded in all early childhood settings. The goal of this policy statement is to provide guidance to early childhood programs and families. This document is Nevada's stance on supporting children's social and emotional development and behavioral health.

The purpose of this policy statement is to:

- Provide guidelines for programs to create policies that prevent suspension and expulsion,
- Set the expectation that policies are carried out free of bias, and
- Raise awareness of the importance of social-emotional learning and behavioral health for all children regardless of ability or disability.

This statement follows recommendations from the U.S. Department of Education (ED) and U.S. Department of Health and Human Services (DHHS). Programs receiving Federal financial assistance must practice equitable student discipline and support healthy social-emotional and behavioral outcomes for young children of all backgrounds<sup>1</sup>. Public and charter programs are also required by the Individuals with Disabilities Education Act (IDEA) to follow regulations governing child discipline when child misconduct is related to a disability<sup>2</sup>. Nevada policy echoes IDEA's emphasis on preschool inclusion and equitable access education and services.

## Key terms that are used throughout this policy statement:

- **Social-emotional skills:** set of skills underlying the ability to understand emotions in self and others, express emotions in culturally appropriate ways, form and sustain healthy relationships, and successfully engage in social environments.
- **Behavioral health:** emotional and mental well-being that involves how we cope with short and long-term stress. This term also refers to mental illnesses such as depression, personality disorders, and addictive patterns<sup>3</sup>.
- **Early childhood program:** any educational or group setting where care is provided before kindergarten entry.
- **Exclusionary discipline:** involves any removal of a child from social interaction or classroom activities for a mandated amount of time in response to challenging behavior. For example, time-out, reduction of program hours without the family understanding why and agreeing that a reduction is in the best interest of the child, or general removal from the classroom.
- **Suspension** includes any disciplinary action that results in the temporary removal of a child from a program.
- **Expulsion** is the permanent removal of a child from a program without the benefit of alternate services<sup>1</sup>.
- **Inclusive programs** are those that include children with special needs into the regular education classroom setting.

## Overview

Expelling a child is the most severe punishment a school can enforce. Pre-kindergarteners are three times more likely to be expelled from school than children in K-12 schools<sup>1</sup>. There are large gender and racial

differences in expulsion rates nationwide<sup>1</sup>. Expulsions occur at the lowest rates in state-funded preschools and in Head Start<sup>4</sup>. Preschool expulsions occur at the highest rate in private and non-profit preschool<sup>4</sup>. No state is required to keep track of disciplinary action taken in private and non-profit programs<sup>1,4</sup>. Of Nevada's preschool-aged children, about 8% attend state-funded and Head Start programs<sup>4</sup>. Another 7% are served through special education services<sup>4</sup>. Thus, most young children who are in preschool are in private and non-profit care.

Expelling or suspending children from school can influence their social and academic development through adulthood. When young children are excluded from school, it can take longer to identify developmental delays or mental health concerns. This lag can cause delays in access to needed support services<sup>5</sup>. Preschool expulsion also impacts the family system. Families feel rejected when asked to leave a school. This rejection affects parents' ability to form relationships with schools in the future. Lack of care for young children places stress on parental employment, finance, and esteem<sup>4</sup>.

Children who are asked to leave a preschool may keep using challenging behavior through high school<sup>5,6</sup>. Young children who are identified as "hard to manage" are more likely to<sup>5,6</sup>:

- experience discipline at school,
- have negative interactions with family and peers,
- have lower academic achievement or drop-out of school,
- experiment earlier with drug and alcohol, and
- engage in delinquency.

Children with challenging behavior also receive fewer positive interactions from teachers and are less engaged in school than their peers. Early behavior concerns can create a domino effect that becomes difficult to reverse<sup>5,7</sup>.

There are strategies that can prevent challenging behavior and build social-emotional skills. High-quality early learning occurs when teachers' learn and use these strategies. Teachers lay the foundation for long-term social and academic success by building social-emotional competence in young children. Programs are most successful in promoting social-emotional skills when families are included. A positive relationship between the school, teachers, and family members leads to the greatest outcomes for children. Interventions and policies that support these practices are needed.

Children who have strong social-emotional skills have higher academic achievement and positive outlooks on learning<sup>5</sup>. They are also less likely to repeat a grade and need special education services<sup>5,6</sup>. As adults, these children are healthier and have less substance abuse, higher earnings, and fewer criminal behaviors<sup>6</sup>. When programs focus on prevention they see fewer challenging behaviors and have less need for suspension and expulsion. These programs also report higher teacher satisfaction and less teacher turnover.

Brain development in early childhood occurs at a very fast pace stressing the need for high-quality early experiences. Both positive and negative early childhood experiences have long-lasting effects. Caregivers who are nurturing and responsive stimulate children's healthy brain development reducing the likelihood of long-term behavior concerns<sup>5,8</sup>. Programs and caregivers who miss the opportunity to build social-emotional skills in children put them at risk for challenging behaviors. Preschool expulsion and suspension practices do not support children's social-emotional health.

## **Guidelines for Early Childhood Programs**

Building a positive school climate and using practices that promote social-emotional learning should replace exclusionary discipline practices. All policies are to be evenly administered without bias.

All regular and inclusive early childhood programs are encouraged to:

- 1) **Develop and clearly communicate classroom and program-wide strategies that support the development of social-emotional skills and prevent challenging behavior.** Program-wide policies apply evenly to all classrooms within a program. Program-wide behavior expectations should be consistent across classrooms and teachers. Expectations should be intentionally taught to all children. Children come to programs with large differences in experience and ability. As such, programs must make sure that behavior expectations and discipline practices are developmentally appropriate to the age and abilities of all children. Policies and procedures should be clearly communicated to all families, staff, and community partners.

Preventive program procedures can include guidance around how to promote positive behavior. Some strategies that promote positive behavior include: developing positive relationships with children and families, using descriptive feedback, and having clear and consistent schedules and routines. Procedures can also include specific strategies staff can use to address challenging behavior.

- 2) **Create and clearly communicate concrete expulsion and suspension policies.** Removal of a child should be used only in unique situations when all other preventive and collaborative methods have been tried. Removal of a child from a program should be used only as a last resort. If a child is in need of a different child care placement, programs should work with the family to find a more suitable placement. Families should be included in developing a smooth transition plan to minimize the amount of time the child is outside of care. Change of care should be a united decision reached by all parties involved including the child's family, teacher, program administrator, and other service providers.

If all parties decide that an alternate placement is best for the child, the family should be encouraged to inform the child's pediatrician to get a developmental screening. If the child has a disability and is receiving services under IDEA part B or C, an inclusive placement should be considered. Children eligible for IDEA part B and C services may not be subject to exclusionary discipline due to behavior related to a disability<sup>2</sup>. Even if a child needs a different placement, he/she is entitled to free and appropriate public education (FAPE).

- 3) **Involve families in positive behavioral support plans and refer families to appropriate services when needed. Services could include, but are not limited to: early intervention, mental health services, or other community agencies.** It may become necessary to gain outside support when challenging behavior affects a child's ability to engage in the social and/or academic setting. Programs must create methods to respectfully share and address behavior concerns with families. Zero to Three offers a resource on how to talk to parents regarding challenging topics. You can find it on [Zero to Three's website by visiting: https://www.zerotothree.org/resources/92-how-to-communicate-with-parents](https://www.zerotothree.org/resources/92-how-to-communicate-with-parents). If support from an outside mental health or developmental consultant is needed, families should give written permission before third party is contacted and should be included in all planning. For family training and support for children with disabilities visit [Nevada PEP at http://nvpep.org](http://nvpep.org).
- 4) **Ensure staff receives professional development on social-emotional learning, positive behavior supports, and early childhood mental health.** Administrator support is needed for teachers to successfully promote social-emotional learning. Staff must receive ongoing professional development. Topics can include, but are not limited to: best practice related to social-emotional learning, positive behavior support, and early childhood mental health.

There are several State and National resources available to support programs to create and implement the above policies. This is not an explicit endorsement of the below programs or resources, but is intended facilitate information sharing.

For information on social-emotional learning, see: The [Center for the Social Emotional Foundations for Early Learning \(CSEFEL\)](http://csefel.vanderbilt.edu) at <http://csefel.vanderbilt.edu>, [Technical Assistance Center on Social Emotional Intervention \(TACSEI\)](http://challengingbehavior.fmhi.usf.edu) at <http://challengingbehavior.fmhi.usf.edu>, The [Pyramid Model Consortium](http://www.pyramidmodel.org/pbis-and-the-pyramid) at <http://www.pyramidmodel.org/pbis-and-the-pyramid>, and [Nevada TACSEI](http://nvtacsei.com) at <http://nvtacsei.com>. For resources related to children with disabilities, see [IDEA](http://idea.ed.gov) at <http://idea.ed.gov>. For resources on early childhood mental health, see U.S. DHHS Health Resources and Service Administration: [Maternal and Child Health](http://mchb.hrsa.gov/programs/earlychildhood) at <http://mchb.hrsa.gov/programs/earlychildhood> or [Nevada Child Mental Health](http://dcfs.nv.gov/Programs/CMH/Community-Based-Outpatient-Services) at <http://dcfs.nv.gov/Programs/CMH/Community-Based-Outpatient-Services>. For information on behavioral health for infants and toddlers, see: [Zero to Three](http://www.zerotothree.org) at <http://www.zerotothree.org>. For information on developmental milestones and behavioral screening see: [Milestone Moments](http://www.cdc.gov/ncbddd/actearly/pdf/parents_pdfs/milestonemomentseng508.pdf) at [http://www.cdc.gov/ncbddd/actearly/pdf/parents\\_pdfs/milestonemomentseng508.pdf](http://www.cdc.gov/ncbddd/actearly/pdf/parents_pdfs/milestonemomentseng508.pdf) or [Birth to Five Watch Me Thrive](https://www.acf.hhs.gov/sites/default/files/ecd/early_intervention_guide_march2014.pdf) at [https://www.acf.hhs.gov/sites/default/files/ecd/early\\_intervention\\_guide\\_march2014.pdf](https://www.acf.hhs.gov/sites/default/files/ecd/early_intervention_guide_march2014.pdf).

- 5) **Screen for social-emotional risk factors using a valid screening tool (e.g., ASQ-SE, SEAM, etc.).** Programs are encouraged to provide families with information on the importance of social-emotional screening. This information can include:
  - The importance of SE development,
  - Resources on how to address delays in social-emotional development, and
  - Who to contact if the family is concerned.
    - For children under the age of three, contact [Nevada Early Intervention Services](http://dhhs.nv.gov/Programs/IDEA/Early_Intervention_Programs/) [http://dhhs.nv.gov/Programs/IDEA/Early\\_Intervention\\_Programs/](http://dhhs.nv.gov/Programs/IDEA/Early_Intervention_Programs/)
    - For children over the age of three contact the school district's Child Find office. A list of district Child Find contacts can be found on the Early Intervention website above.

## Conclusion

Addressing the use of suspension and expulsion in early childhood settings is vital to Nevada's goal of increasing access to high-quality early education. Preschool expulsion is common in private and non-profit early care<sup>4</sup>. Diverse research shows the negative impact of expulsion on children and families<sup>5,6,8</sup>. The preschool years are critical for developing a positive foundation for learning, health and wellness, and the social-emotional skills<sup>1</sup>. These skills are necessary to be successful throughout the lifespan.

<sup>1</sup> U.S. Department of Health and Human Services & U.S. Department of education (2015). *Policy Statement on Expulsion and suspension Policies in Early Childhood Settings*. Retrieved from the [ACF website at: http://www.acf.hhs.gov/sites/default/files/ecd/expulsion\\_suspension\\_final.pdf](http://www.acf.hhs.gov/sites/default/files/ecd/expulsion_suspension_final.pdf) ; ED Office for Civil Rights and DOJ (2014). *Dear Colleague Letter on the Nondiscriminatory Administration of School Discipline*, at 3-4. Retrieved from the [Dept. of Ed at www.ed.gov/ocr/letters/colleague-201401-title-vi.pdf](http://www.ed.gov/ocr/letters/colleague-201401-title-vi.pdf) ; NIEER (2015). *State Preschool Yearbook*. Rutgers; U.S.; Department of Education Office for Civil Rights (2014). *Data Snapshot: Early childhood education* [Issue brief No. 2].

<sup>2</sup> Nevada Department of Administration (2011). *Suspension, expulsion or exclusion of pupil with disability* (NAC 388.265). Retrieved from [Nevada Dept. of Administration at http://www.leg.state.nv.us/nac/nac-388.html](http://www.leg.state.nv.us/nac/nac-388.html); Individuals with Disabilities Improvement Act Regulations (2004): 34 CFR 300.530 through 300.536 (IDEA disciplinary protections); 34 CFR 300.101 and 300.17 (FAPE); 34 CFR 104.4, 104.38; 28 CFR 35.130(b)(1), (7).

<sup>3</sup> Carolina's Healthcare System. *What is behavioral health?* Retrieved from [Carolina Healthcare System at: http://www.carolinashealthcare.org/what-is-behavioral-health](http://www.carolinashealthcare.org/what-is-behavioral-health).

<sup>4</sup> Gilliam, W. S., & Shahar, G. (2006). Preschool and child care expulsion and suspension: Rates and predictors in one state. *Infants & Young Children*, 19, 228-245; Gilliam, W. S. (2005). Policy Brief 3: Prekindergartners left behind. Retrieved from [TACSEI at: http://challengingbehavior.fmhi.usf.edu/explore/policy\\_docs/prek\\_expulsion.pdf](http://challengingbehavior.fmhi.usf.edu/explore/policy_docs/prek_expulsion.pdf)

<sup>5</sup> Jones, D. E., Greenbert, M., & Crowley, M. (2015). Early social-emotional functioning and public health: The relationship between kindergarten social competence and future wellness. *American Journal of Public Health*, e-View Ahead of Print. doi: 10.2105/AJPH.2015.302630

<sup>6</sup> Moffitt T.E., et al. (2011). A gradient of childhood self-control predicts health, wealth, and public safety. *Proceedings of the National Academy of Sciences of the United States of America*. 108(7): 2693-2698.

<sup>7</sup> Raver, C. C., Jones, S. M., Li-Grining, C., Zhai, F., Metzger, M. W., & Solomon, B. (2009). Targeting children's behavior problems in preschool classrooms: A cluster-randomized controlled trial. *Journal of Consulting and Clinical Psychology*, 77(2), 302-316.

<sup>8</sup> Koglin, U., & Peterman, F. (2011). The effectiveness of the behavioural training for preschool children. *European Early Childhood Education Research Journal*, 19(1), 97-111.